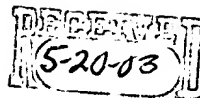


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PATENTS**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****Applicant(s):** Chandrasekhar Narayanaswami**Examiner:** Henry N. Tran**Serial No:** 09/607,800**Art Unit:** 2674**Filed:** June 30, 2000**Docket:** YOR920000226US1 (13576)**For:** A PERSONAL SMART POINTING DEVICE **Dated:** May 20, 2003Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**AMENDMENT**

Sir:


Responsive to the Official Action dated February 20, 2003, Applicant respectfully requests the Examiner to reconsider the application in view of the following amendments and remarks.

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Dated: May 20, 2003

Grace Colucci

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. YOR920000226US1 (13576)	
Applicant(s): Chandrasekhar Narayanaswami					
Serial No. 09/607,800	Filing Date June 30, 2000	Examiner Henry N. Tran		Group Art Unit 2674	
Invention: A PERSONAL SMART POINTING DEVICE					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	24 -	27 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ In the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510/IBM <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: May 20, 2003		
Steven Fischman Registration No. 34,594 SCULLY, SCOTT, MURPHY & PRESSER 400 Garden City Plaza Garden City, New York 11530 (516) 742-4343					
I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence					
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Serial No. 09/607,800	Filing Date June 30, 2000	Examiner Henry N. Tran	Group Art Unit 2674

Invention: **A PERSONAL SMART POINTING DEVICE**
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To: Examiner Henry N. Tran**From:** Steven Fischman**Fax:** 703-872-9314**Pages:** 21 pages including cover sheet**Phone:****Date:** 5/20/2003**Re:** US Serial No. 09/607,800**CC:**

Group Art Unit: 2674

Docket No. YOR920000226US1 (13576)

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